

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. 08/974,186 FILING DATE 11/19/97
APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
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50						
TOTAL IND.	1		1			
TOTAL DEP.	4		4			
TOTAL CLAIMS	5		5			

IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1			1	
52	1			2	
53	1			2	
54	1			2	
55				2	
56				1	
57				1	
58				1	
59				1	
60				1	
61				1	
62				2	
63				2	
64				2	
65				2	
66				1	
67				2	
68				2	
69				2	
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99					
100					
TOTAL IND.				2	
TOTAL DEP.				30	
TOTAL CLAIMS				32	